



ARIZONA STATE RETIREMENT SYSTEM (ASRS)
VERIFICATION OF CONTRIBUTIONS NOT WITHHELD
(CNW) INSTRUCTIONS *EMPLOYER USE ONLY*

Phoenix (602) 240-2000
Tucson (520) 239-3100
Toll-free (800) 621-3778
TTY (602) 240-5333
www.asrs.state.az.us

Dear Payroll or Human Resources Manager:

One of your current or past employees has indicated he or she qualified for membership with the ASRS for a period of time when ASRS contributions were not withheld. We need your cooperation to verify the employee's information. We ask that you read the following information carefully, complete the enclosed form and return it to us as soon as possible. For more information, please refer to the ASRS employer manual or Arizona Revised Statutes § 38-738.

CNW Eligibility Requirements

To determine an ASRS member's eligibility for a CNW calculation, the ASRS requires verification of all the following information:

- 1) Membership** – Employees must meet the criteria for membership during their employment when contributions were not withheld by an ASRS employer. The position must have been covered under Section 218 of the Social Security Act. Employers may use the information below to determine an employee's membership eligibility. If the employee qualifies for membership, please list the dates of employment by fiscal year.

From 7/1/1971 to 6/30/1990, the member worked a minimum of 20 hours per week for at least 5 continuous months in a fiscal year.

From 7/1/1990 to 6/30/1992, the member worked a minimum of 20 hours per week for at least 5 months in a fiscal year.

From 7/1/1992 to 7/1/1999, the member worked a minimum of 20 hours per week for at least 20 weeks in a fiscal year.

From 7/1/1999, membership is defined as working for one employer at least 20 weeks in a fiscal year and at least 20 hours per week. A member could add together work from multiple employers to meet eligibility prior to 7/1/1999.

- 2) Salary** – The amount of compensation the member was paid by the employer each fiscal year. To assist the ASRS in calculating the CNW, please provide the salary by fiscal year.

Acceptable Forms of Verification

Verification may be provided by submitting either the Verification of Contributions Not Withheld form or a letter from the employer.

Employer and Employee Invoice

Once the ASRS receives the employer verification, we will issue the member and the employer an invoice for payment due.

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Statute of Limitations

Beginning July 1, 2004, the employer is only responsible for making payments for service worked within 15 years of the date of the request.

Burden of Proof

It is the responsibility of the member to prove a contribution error was made. In some cases, the employer will not have records for the time in question. Below are documents the employee can provide to the employer to support the claim:

Documents proving member was employed and covered under Section 218 agreement	Documents proving member met time and hours requirements	Documents verifying member's compensation
<ul style="list-style-type: none">• Pay Stubs• W-2s• Employer Verification• Personnel Action Form• Social Security Earnings Report	<ul style="list-style-type: none">• Pay Stubs• Contract with W-2s• Employer Verification• Payroll Records• Timesheets	<ul style="list-style-type: none">• Pay Stubs• W-2s• Employer Verification

If the employer does not have records and the member is unable to provide sufficient documentation to prove the member's eligibility for a CNW adjustment, the member may choose from one of the following options:

- 1) The member can purchase the time as Other Public Service Non-participatory, and should contact the ASRS for instructions.
- 2) The member can present to the ASRS all of the documentation he or she provided to the employer, along with the employer's response. The ASRS will review the documents and determine eligibility.



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VERIFICATION OF CONTRIBUTIONS NOT
WITHHELD (CNW) EMPLOYER USE ONLY

PLEASE PRINT
COMPLETE AND SEND
TO: ASRS - Member Services
PO Box 33910
Phoenix, AZ 85067-3910

Phoenix (602) 240-2000
Tucson (520) 239-3100
Toll-free (800) 621-3778
TTY (602) 240-5333
www.asrs.state.az.us

The following should be completed by the payroll or human resources manager. Please print

1) Member Information

Social Security Number	Member Name (Last, First, Middle)	Other Names Used
Do you have records available for this employee? <input type="checkbox"/> Yes <input type="checkbox"/> No		Was position covered by Social Security 218 Agreement? <input type="checkbox"/> Yes <input type="checkbox"/> No
Position title and status (i.e. permanent, seasonal, etc.) at time of claim.		

2) Statements of Understanding and Agreement

You must initial the following to indicate you understand and agree with each statement.

initial	I understand it is my responsibility to verify the accuracy of the information I am providing below. I understand any person who knowingly makes any false statement, or who falsifies or permits to be falsified any record of the retirement plan with an intent to defraud the plan, is guilty of a Class 6 felony pursuant to Arizona Revised Statutes § 38-793.
initial	I understand, by completing the chart below, the employer will receive an invoice for the contributions owed during the time listed as well as the accumulated interest on the CNW for both the member and employer contributions.

3) Employment Information

Fiscal Year Example: 1989-1990	Check each month worked.												List hours and salary for each year.* *Please make sure salary is based on fiscal year, not calendar year.	
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Fiscal Year Salary for Months Listed	Weekly Hours

4) Employer Information and Signature of Authorized Payroll or Human Resources Manager

Employer Name	Phone Number ()
Name of Authorized Payroll or HR Manager (Please print.)	Title
Signature of Authorized Payroll or HR Manager (Please sign.)	Date

Disclosure of member's Social Security number is mandated by Section 6109 of the Internal Revenue Code.*The ASRS will use Social Security numbers only to obtain information about an individual's ASRS account to inform the Internal Revenue Service about distributions and withholdings with respect to the individual's account.

